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**FORM D** 

**PROCESSED** 

JAN 28 2009

THOMSON REUTERS

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549
TEMPORARY

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

**OMB APPROVAL** 

OMB Number: 3235-0076 Expires: January 31, 2009 Estimated average burden hours per response . . . 16.00

	SEC USE ONLY					
Prefix		Serial				
	-					
	DATE R	ECEIVED				
		1				

Name of Offering Tegean Fund, LP (the "Iss		is an amendn	nent and name has c	nanged, and	indicate change.)		
Filing Under (Check box(es)	that apply):	[ ] Rule 504	[ ] Rule 505	[X] RL	ule 506 [ ] Sect	tion 4(6) [ ]	ULOE
Type of Filing:	[X] New Filing		Amendment				
		A. BA	ASIC IDENTIFICATION	N DATA			
Enter the information reques	sted about the issue	эг			,	118670111111111111	Pije Balli Prijr (lag pirin (lag par)
Name of Issuer Tegean Fund, LP	([] check if this	is an amendo	nent and name has c	nanged, and	indicate change.)		
Address of Executive Office: c/o Tegean Partners, LLC, York, New York 10017			City, State, Zip Code) DE. 45th St. 16th flo	or, New	Telephone Numl 646-336-4901	090	000142
Address of Principal Busines (if different from Executive C			et, City, State, Zip Co	de)	Telephone Numb		Area Code)  Maji Processin
Brief Description of Busines The issuer seeks to invest		acurities and	or other financial in	etrumente	•		Section
Type of Business Organizat  [ ] corporation			partnership, already		[ ] other (plea	ase specify):	JAN 152009
business trust			partnership, to be for	med			Washin
Actual or Estimated Date of Jurisdiction of Incorporation		(Enter two-le	Month/Year 07/2008 etter U.S. Postal Servi		ion for State:	naicu	Weshington, DC 101
		CN for Cana	da; FN for other forei	gn jurisdictio	n)	DE	

GENERAL INSTRUCTIONS Note: This is a special Temporary Form D (17 CFR 239.500T) that is available to be filed instead of Form D (17 CFR 239.500) only to issuers that file with the Commission a notice on Temporary Form D (17 CFR 239.500T) or an amendment to such a notice in paper format on or after September 15, 2008 but before March 16, 2009. During that period, an issuer also may file in paper format an initial notice using Form D (17 CFR 239.500) but, if it does, the issuer must file amendments using Form D (17 CFR 239.500) and otherwise comply with all the requirements of § 230.503T.

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exception under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(8).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549.

Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. The copy not manually signed must be a photocopy of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

## A. BASIC IDENTIFICATION DATA

- Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) that Apply: [X] Promoter	[ ] Beneficial Owner	[ ] Executive Officer	[ ] Director	[X] General and/or Managing Partner
Full Name (Last name first, if individual) Tegean Partners, LLC (the "General Partr	er")			
Business or Residence Address (Numl Two Grand Central Tower, 140 E. 45th St. New York, New York 10017	per and Street, City, State, Zi 16th floor	p Code)		
Check Box(es) that Apply: [ ] Promoter	[ ] Beneficial Owner	[ ] Executive Officer	[ ] Director	[X] General and/or Managing Partner
Full Name (Last name first, if individual) Maheras, Thomas				
Business or Residence Address (Numl 312 East 30th Street PH E New York, New York 10016	per and Street, City, State, Zi	p Code)		
Check Box(es) that Apply: [ ] Promoter	[ ] Beneficial Owner	[ ] Executive Officer	[ ] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Num	per and Street, City, State, Zi	p Code)		
Check Box(es) that Apply: [ ] Promoter	[ ] Beneficial Owner	[ ] Executive Officer	[ ] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Num	ber and Street, City, State, Zi	p Code)		
Check Box(es) that Apply: [ ] Promoter	[ ] Beneficial Owner	[ ] Executive Officer	[ ] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Num	ber and Street, City, State, Zi	p Code)		
Check Box(es) that Apply: [ ] Promoter	[ ] Beneficial Owner	[ ] Executive Officer	[ ] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Num	ber and Street, City, State, Zi	p Code)	=	

	B. INFORMATION ABOUT OFFERING						
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?						
2.	Answer also in Appendix, Column 2, if filing under ULOE.  What is the minimum investment that will be accepted from any individual?						
3.	Does the offering permit joint ownership of a single unit?  Yes No [X] []						
4.							
	ll Name (Last name first, if individual) It applicable.						
	siness or Residence Address (Number and Street, City, State, Zip Code)						
Na	me of Associated Broker or Dealer						
	ates in Which Person Listed Has Solicited or Intends to Solicit Purchasers						
(CI	neck "All States" or check individual States) [ ] All States						
	AL [] AK [] AZ [] AR [] CA [] CO [] CT [] DE {] DC [] FL [] GA [] HI [] ID {] IL [] IN [] IA [] KS [] KY [] LA [] ME [] MD {] MA {] MI [] MN [] MS [] MO []						
ì	MT[] NE[] NV[] NH[] NJ[] NM [] NY [] NC [] ND [] OH [] OK [] OR [] PA []						
	RI[] SC[] SD[] TN[] TX[] UT[] VT[] VA[] WA[] WV[] WI[] WY[] PR[]    Name (Last name first, if individual)						
Ьu	siness or Residence Address (Number and Street, City, State, Zip Code)						
Na	me of Associated Broker or Dealer						
	ates in Which Person Listed Has Solicited or Intends to Solicit Purchasers heck "All States" or check individual States)						
	[ ] All States AL [ ] AK [ ] AZ [ ] AR [ ] CA [ ] CO [ ] CT [ ] DE [ ] DC [ ] FL [ ] GA [ ] HI [ ] ID [ ]						
:	IL[] IN[] IA[] KS[] KY[] LA[] ME[] MD[] MA[] MI[] MN[] MS[] MO[]						
	MT [ ] NE [ ] NV [ ] NH [ ] NJ [ ] NM [ ] NY [ ] NC [ ] ND [ ] OK [ ] OR [ ] PA [ ] RI [ ] SC [ ] SD [ ] TN [ ] TX [ ] UT [ ] VT [ ] VA [ ] WA [ ] WV [ ] WI [ ] WY [ ] PR [ ]						
Fu	ll Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)							
Na	me of Associated Broker or Dealer .						
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)							
1	AL[] AK[] AZ[] AR[] CA[] CO[] CT[] DE[] DC[] FL[] GA[] HI[] ID[]						
	IL [] IN [] IA [] KS [] KY [] LA [] ME [] MD [] MA [] MI [] MN [] MS [] MO [] MT [] NE (] NV [] NH [] NJ [] NM [] NY [] NC [] ND [] OH [] OK [] OR [] PA []						
	RI[] SC [] SD [] TN [] TX [] UT [] VT [] VA [] WA [] WV [] WI [] WY [] PR []						

#### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Aggregate Amount Already Offering Price Sold 0 \$ 0 Equity: \_\_\_\_\_\_\$ 0 0 \$ □ Preferred □ Common Convertible Securities (including warrants): .......\$ Partnership Interests.....\$ 1,000,000,000(a) \$ 18,450,000 1.000,000,000(a) \$ 18,450,000 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchases Accredited Investors 5 18,450,000 Non-accredited Investors..... 0 0 Total (for filings under Rule 504 only)..... N/A N/A Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Dollar Amount Type of offering Type of Security Sold Rule 505 ..... N/A Regulation A ...... N/A \$ <u>0</u> 0 0 Rule 504 ..... \$ N/A Total ...... N/A a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees ..... IXI Printing and Engraving Costs ..... X \$ X Legal Fees ..... \$ 35,000

Accounting Fees

Engineering Fees.....

Sales Commissions (specify finders' fees separately).....

7,500

5,000

50,000

0

凶

(X)

X

X

Х

\$

\$

\$

\$

<sup>(</sup>a) Open-ended fund; estimated maximum aggregate offering amount.

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	b.	Enter	the	difference	between	the	aggregate	offering	ргісе	given	in	resp	onse	to P	art	C -
	Que	estion 1	1 and	d total expe	enses furr	ishe	d in respon	se to Pa	rt C -	Questi	on	4.a.	This	differ	enc	e is
	the	"adiust	ed a	ross proce	eds to the	issu	er."								•••	

999,950,000

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes below. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjustment gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

		Payment Officer Directors Affiliate	s, s, &			Payments to Others
Salaries and fees	図	\$	<u>o</u>	X	\$	<u>o</u>
Purchase of real estate	$\boxtimes$	\$	<u>o</u>	X	\$	<u>o</u>
Purchase, rental or leasing and installation of machinery and equipment	X	\$	<u>o</u>	X	\$	<u>0</u>
Construction or leasing of plant buildings and facilities	$\boxtimes$	\$	<u>o</u>	図	\$	<u>o</u>
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	X	\$	<u>0</u>	(X)	\$	<u>o</u>
Repayment of indebtedness	Œ	\$	<u>o</u>	X	\$	<u>o</u>
Working capital	(33)	\$	<u>0</u>	Ø	\$	<u>o</u>
Other (specify): Portfolio Investments	X	\$	<u>0</u>	X	\$	999,950,000
Column Totals	X	\$	<u>0</u>	Œ	\$	999,950,000
Total Payments Listed (column totals added)	図		\$ <u>99</u>	9,95	0,00	<u>00</u>

## D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type) Tegean Fund, LP	Signature M.L.	Date  -   2 - 0 1
Name (Print or Type) Thomas Maheras	Title of Signer (Print or Type) Managing Member of the General Partne	er

**ATTENTION** 

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)